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                                                                                               S.B. No. 963
         By: Ellis
         (In the Senate - Filed February 19, 2009; March 9, 2009, read first time and referred to Committee on State Affairs; April 1, 2009, reported adversely, with favorable Committee
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         Substitute by the following vote: Yeas 9, Nays 0; April 1, 2009,
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         sent to printer.)
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         COMMITTEE SUBSTITUTE FOR S.B. No. 963
                                                                                                  By: Ellis
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                                              A BILL TO BE ENTITLED
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                                                         AN ACT
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         relating to regulation of premium rates for long-term care
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         insurance.
                   BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
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         SECTION 1. Subchapter B, Chapter 1651, Insurance Code, is amended by adding Section 1651.056 to read as follows:
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                   Sec. 1651.056. REVIEW; APPROVAL OR DISAPPROVAL OF PREMIUM
                    (a) A long-term care premium rate may not be used until the
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         rate has been filed with the department and approved by the
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         commissioner.
         (b) The commissioner may disapprove a long-term care premium rate that is not actuarially justified or does not comply with standards established under this chapter or adopted by rule by
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         the commissioner.
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                   (c) An insurer who obtains the commissioner's approval of an
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          increase of a long-term care premium rate under Subsection (a)
         shall:
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                            (1)
                                  notify policyholders
                                                                        of
                                                                                 the
                                                                                         scheduled
         increase at least 30 days prior to the date that the policyholder is required to make a premium payment at the increased rate; and
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                                    offer to:
                                    (A) continue coverage at the increased rate;(B) reduce policy benefits provided by
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         long-term care coverage in effect immediately before the scheduled
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         increase without the requirement of additional underwriting so that
         the premium payments required are not increased; or

(C) convert the coverage to a paid-up status with
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         a shortened benefit period.
                   (d) The offer to reduce policy benefits under Subsection
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         (c)(2)(B) or convert coverage under Subsection (c)(2)(C) must be made subject to terms approved by the commissioner.

(e) A policyholder shall elect whether to accept the offer
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         to continue coverage, reduce policy benefits, or convert coverage
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         under Subsection (c) not later than the 30th day after the date of
         the notice that the insurer provides under Subsection (c).

(f) A policyholder who fails to make an election that complies with Subsection (e) is considered to have elected to continue coverage at the increased rate.
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         SECTION 2. This Act applies only to a long-term care insurance policy, contract, or evidence of coverage that is delivered, issued for delivery, or renewed on or after January 1, 2010. A long-term care insurance policy, contract, or evidence of coverage delivered, issued for delivery, or renewed before January 1, 2010, is governed by the law as it existed immediately before the effective date of this Act, and that law is continued in effect for
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SECTION 3. This Act takes effect September 1, 2009.

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that purpose.